### SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138

## APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Amount Paid: 5 125. " LOS Date: 0:07-Zoning District Application No.: 0/1S/12 Raj Classa 100 0 888

Changes in plans must be approved by the Zoning Department.	
LAND USE 🕱 SANITARY 🗍 PRIVY 🗍 CONDITIONAL USE 🗍	SE SPECIAL USE B.O.A. OTHER
Use Tax Statement for Legal Description	
Legal Description1/4 of1/4 of Section 26 Township	1
Gov't Lot Lot BlockSubdivision	V: 1, P. 378 1202 Acreage 9: 76
Volume 1031 Page 761 of Deeds Parcel I.D. 04-0	Parcel I.D. 04-004-2-45-09-26-2 05-003-10000
Property Owner Ronald Olson	Contractor RJO Constructon UC(Phone) 715-554-1942
Address of Property 5255 Kelly Lake Rd	Plumber M.K. Harrington
	Authorized Agent Rod Olson (Phone) 715-554-1942
Telephone 715-554-7051 (Home) (Work)	Written Authorization Attached: Yes \( \Bar\) No \( \Bar\) MY Brother
is your structure in a criciciatio zone? Tes (A) No (1) 11 yes.	Distallue iloiti olioleille. Gleatei Iliaii /3 🚜 /3 to 40 📜 less tiaii 40 🛄
Structure: New X Addition Existing Fair Market Value 4800 Square Footage 880 USE:	Basement: Yes No X Number of Stories Sanitary: New X Existing Privy City  Type of Septic/Sanitary System Conventional
	☐ Mobile Home (manufactured date)
Residence sq. ft. 58064-36 porch sq. ft	☐ Commercial Principal Building Addition (explain)
	☐ Commercial Accessory Building (explain)
☐ <b>*</b> Residence w/attached garage (# of bedrooms)	☐ Commercial Accessory Building Addition (explain)
Residence sq. ft Garage sq. ft	☐ Commercial Other (explain)
☐ Residential Addition / Alteration (explain)	☐ Special/Conditional Use (explain)
Residential Accessory Building (explain)	☐ External Improvements to Principal Building (explain)
☐ Residential Other (explain)	☐ External Improvements to Accessory Building (explain)
FAILURE TO OBTAIN A PERMIT $\underline{\mathrm{or}}$ STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN	TION WITHOUT A PERMIT WILL RESULT IN PENALTIES

6

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administrating county addresses to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature)

Date

1 - 1 - 12 700 NO 9

Address to send permit See Notice on Back 10 4 Aue

PLEASE COMPLETE REVERSE SIDE

(If you recently purchased the property Attach a Copy of Recorded Deed)

Copy of Tax Statement or V

1 PORT

10

Ke WI

54005

APPLICANT -

State Sanitary Number 12-54S

Date

6

137|2

Permit Number 10-0500 Permit Denied (Date)

Date 19:07-180

Inspection Record:

12

Reason for Denial:

Permit Issued:

andoned

Condition: Witigation Plan Required: řés ₹ × Date of Inspection Variance (B.O.A.) # とつご

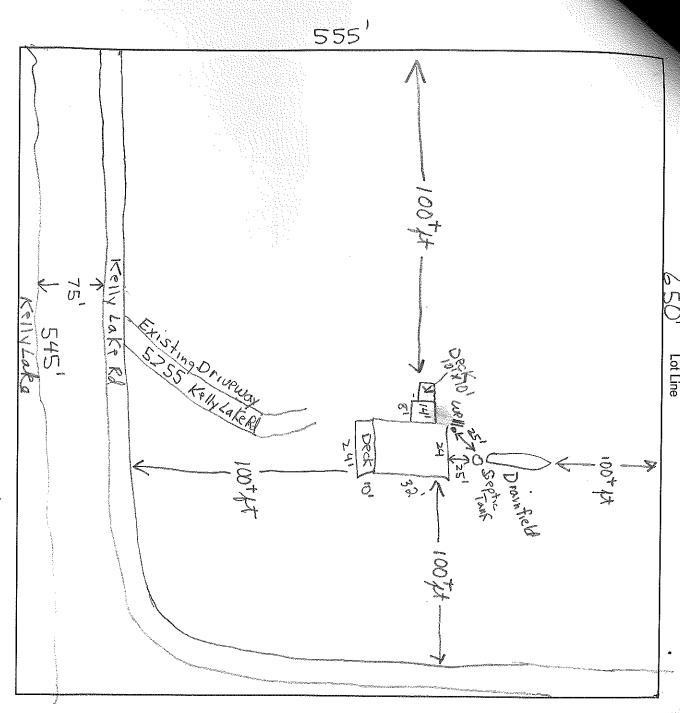
Rec'd for Issuance

ARE LICHIE

Signed

ノファ

Date of Approval



### Name of Frontage Road ( Kelly Lake 2

- Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
- Ŋ Show the location, size and dimensions of the structure
- ယ Show the location, size and dimensions of attached deck(s), porch(s) or garage
- 4. Show the location of the well, holding tank, septic tank and drain field

DETAILED PLOT PLAN

IS NECESSARY, FOLLOW

STEPS 1-8 (a-o) COMPLETELY.

MPORTANT

- Ò Show the location of any lake, river, stream or pond if applicable

Show the location of other existing structures.

9

- Show the location of any wetlands or slopes over 20 percent.
- Show dimensions in feet on the following:
- Building to all lot lines
- Building to centerline of road
- Building to lake, river, stream or pond
- Q Holding tank to closest lot line
- Φ Holding tank to building
- Holding tank to well
- Holding tank to lake, river, stream or pond
- Privy to closest lot line

- Privy to building
  Privy to lake, river, stream or pond
- \_ ~ ~ -Septic Tank and Drain field to closest lot line
- Septic Tank and Drain field to building
- ∄
- Septic Tank and Drain field to well
  Septic Tank, and Drain field to lake, river, stream or pond.
- 0 Well to building

\*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued.

For The Construction Of New One & Two Family Dwellings: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.

You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits

Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked

APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138

## APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Application No.:

Bayfield Co. Zoning Dept

Date: 6-37-Amount Paid: Zoning District \$ 00.00 \*\* 18 R-183/04ss 0/1S/10 たら

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.	*LICANT.
LAND USE A SANITARY PRIVY CONDITIONAL USE SPECIAL USe Tax Statement for Legal Description らっさんナイ, エハ くっぺら やれっ 431 E.1	SPECIAL USE B.O.A. OTHER
Legal Description1/4 of1/4 of Section1	44 North, Range 7 West. Town of Barnes
Gov't Lot Block Subdivision	CSM# Acreage /. 88
Volume 471 Page 22 of Deeds Parcel I.D. 04-004-2	1-2-44-09-05-105-004-21000
Property Owner MARCM and Lizabeth A Lybeck contractor	ctor Sclf (Phone)
Address of Property 2765 BOAY Lake 12 Trustees Plumber	81
	Authorized Agent (Phone)
(Selly Selly	Written Authorization Attached: Yes 🗍 No 🌠
	Distance from Shoreline: greater than 75' 🔲 75' to 40' 💢 less than 40 🗍
Structure: NewAdditionExistingBasement: YesNo	Basement: Yes No Number of Stories Sanitary: New Existing V Privy City  Type of Septic/Sanitary System CONV.
Residence sq. ft Con    Residence w/deck-porch (# of bedrooms)	☐ Commercial Principal Building
Residence sq. ft. Porch sq. ft	☐ Commercial Principal Building Addition (explain)
Deck sq. ft □ Con	☐ Commercial Accessory Building (explain)
□ ** Residence w/attached garage (# of bedrooms) □ Con	☐ Commercial Accessory Building Addition (explain)
Residence sq. ft. Garage sq. ft Con	☐ Commercial Other (explain)
	☐ Special/Conditional Use (explain)
☐ Residential Accessory Building (explain) ☐ Exte	External Improvements to Principal Building (explain)
(Stars) to lake	☐ External Improvements to Accessory Building (explain)
FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN	VITHOUT A PERMIT WILL RESULT IN PENALTIES

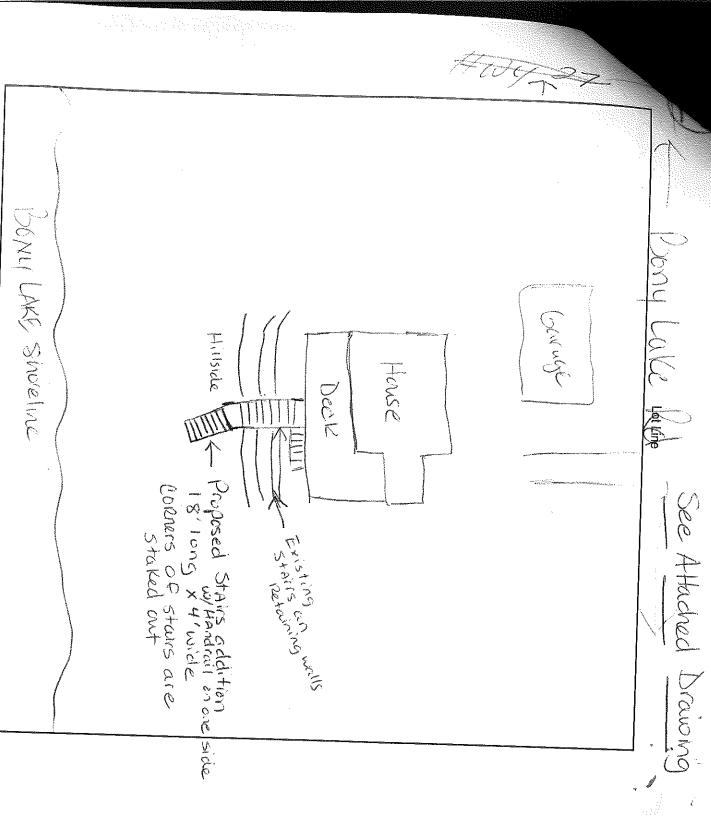
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to country officials charged with administering country ordinances, to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature)

Owner or Authorized Agent (Signature)

Owiter of Authorized Agent (Signature)	TOUR COLOR		Pare Cr / Cr / Cx
Address to send permit 1712 R	Address to send permit 17 12 Roya 1 Lane, New Richmond, WI 54017	NO TOT 59	017 ATTACH /
* See Notice on Back	APPLICANT PLEASE COMPLETE REVERSE SIDE	REVERSE SIDE	opy of cently a Cop
Permit Issued:	State Sanitary Number	Date	
Date 10-07-12	Permit Number 12-0303	Permit Denied (Date)	Re)
Reason for Denial:	Reason for Denial: Inspection Record: Metall requirements.		
	By M. Fustal:	Date of Inspec	Date of Inspection 6-26-12
Mitigation Plan Required: Yes ☐ No 🗷		Varie	Variance (B.O.A.) #
Condition: Mastual by	t munagement practi	is to pur	int ecosion or
silations	silption of the Polar or withouts.	•	
	Signed Michael Stutele	al hutel	6-27-12
Rec'd for Issuance	Inspector	Ö	Date of Approval

AUR LOWIN



# Name of Frontage Road (1200)4 Lalee

- Ņ ·~~ Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
- Show the location, size and dimensions of the structure
- 4. ငှာ Show the location, size and dimensions of attached deck(s), porch(s) or garage.
- Show the location of the well, holding tank, septic tank and drain field.
- Ģ Show the location of any lake, river, stream or pond if applicable

STEPS 1-8 (a-o) COMPLETELY DETAILED PLOT PLAN

MFORTANT

- က Show the location of other existing structures.
- ~1 Show the location of any wetlands or slopes over 20 percent.
- တ Show dimensions in feet on the following:
- Building to all lot lines
- Building to centerline of road
- Ö Building to lake, river, stream or pond
- Ω Holding tank to closest lot line
- Œ Holding tank to building

- Holding tank to well
  Holding tank to lake, river, stream or pond
  Privy to closest lot line

- Privy to building
- Privy to lake, river, stream or pond

- 3
- Septic Tank and Drain field to closest lot line Septic Tank and Drain field to building Septic Tank and Drain field to well Septic Tank, and Drain field to lake, river, stream or pond.
- Well to building

\*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits.

Stake or murk proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector will not make an inspection until location(s) are staked or marked.

SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138



Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

od until all fees are naid

Application No.: 13-0304

Date: 10-37-13

Zoning District R-1, Class 1

Amount Paid: \$75.00 205

All 18/12

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Changes in plans must be approved by the Zoning Department.	BEEN ISSUED TO APPLICANT.
LAND USE 🗖 SANITARY 🗍 PRIVY 🗍 CONI	CONDITIONAL USE SPECIAL USE B.O.A OTHER
Use Tax Statement for Legal Description	
Legal Description1/4 of1/4 of Section	Township 44 North, Range West, Town of SACUCS
Gov't Lot Sub-	Subdivision CSM # Acreage . 3 0 C
Volume 732 Page 366 of Deeds Parcel	Parcell.D. 6400424409081050522000
Property Owner Wendy Hiltunen	Contractor Self (Phone)
3865	20 Plumber
Barnes, Wi S4873	Authorized Agent (Phone)
Telephone 7/5 -387-44/£(Home)	(Work) Written Authorization Attached: Yes 🗍 No 🔀
ls your structure in a Shoreland Zone? Yes ☑ No ☐	If yes. Distance from Shoreline: greater than 75' ☐ 75' to 40' 🛭 less than 40 ☐
ure: New $X$ Addition Exis	Basement: Yes No V Nur
☐ * Residence or Principal Structure (# of bedrooms)	
	☐ Commercial Principal Building
□ * Residence w/deck-porch (# of bedrooms)	☐ Commercial Principal Building Addition (explain)
Residence sq. ft. Porch sq. ft  Deck sq. ft  Deck sq. ft  Deck sq. ft	Commercial Accessory Building (explain)
nce w/attached garage (# c	☐ Commercial Accessory Building Addition (explain)
Residence sq. ft. Garage sq. ft	Commercial Other (explain)
☐ Residential Addition / Alteration (explain)	□ Special/Conditional Use (explain)
	☐ External Improvements to Principal Building (explain)
A Residential Other (explain) DOTIO with Sitting	☐ External Improvements to Accessory Building (explain)
FAILURE TO OBTAIN A PERMIT or STARTING	FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) h	I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I

(we) acknow to issue a p consent to nowledge that I (we) am (are) responsible for the defail and accuracy of all information. I (we) and (are) providing and that it will be realed upon by saying a country in decinining whether a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

or Authorized Agent (Signature)

Authorized Agent (Signature)

Authorized Agent (Signature)

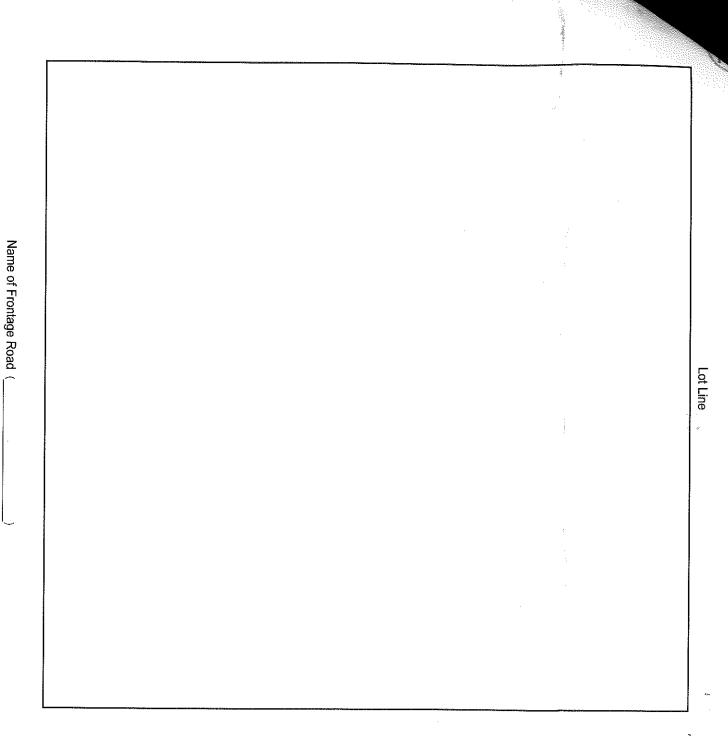
Owner or Authorized Agent (Signature) \_ Address to send permit\_ See Notice on Back 201 Bluebird Lend APPLICANT ane PLEASE COMPLETE REVERSE SIDE 90 Ywshteld C. 54449 Copy of Tax Statement or

(If you recently purchased the property

Attach a Copy of Recorded Deed)

Variance (B.O.A
Exicuted Date of Inspection 6-26-12
State Sanitary Number

3MG 76ML



- Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N)
- Ŋ Show the location, size and dimensions of the structure.
- ယ Show the location, size and dimensions of attached deck(s), porch(s) or garage.
- 4 Show the location of the well, holding tank, septic tank and drain field

IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-8 (a-o) COMPLETELY.

- Ċī Show the location of any lake, river, stream or pond if applicable
- တ Show the location of other existing structures.
- Show the location of any wetlands or slopes over 20 percent.
- œ Show dimensions in feet on the following:
- Building to all lot lines
- Building to centerline of road
- Building to lake, river, stream or pond
- Ò Holding tank to closest lot line
- Holding tank to building
- Holding tank to well
- Holding tank to lake, river, stream or pond Privy to closest lot line

- Privy to building
- Privy to lake, river, stream or pond
- <u>~</u> ~ ~ ~ Septic Tank and Drain field to closest lot line Septic Tank and Drain field to building
- 3 Septic Tank and Drain field to well
- Septic Tank, and Drain field to lake, river, stream or pond.
- Well to building

\*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits.

will not make an inspection until location(s) are staked or marked Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector

